Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>02/01/2</u> 008	Address:	521 E. TIPTON ST.
Case #:	<u>43-25623</u>		BROWNSTOWN, IN. 47220
County:	<u>JACKSON</u>		
Operati	aboratory Scizure (check one) onaf Lab cal/Glassware/Equipment (only) ite (only)	Scizure Location (c Residence Outbuilding Vehicle	check all that apply) Hotel/Motel Open — No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) Lithium/Ammonia Reaction(s): Red Phosphorous/Iodine Reaction(s): Iflammable Solvents: Water Reactive Metal (Lithium): Anhydrous Ammonia: in tank, in vehicle Hydrochloric Acid Gas Generator(s): Corrosive Acid: Corrosive Base:			
Child under age 18 discovered (check one) Investigative Information ☐ Yes (number present) ☐ Ephedrine/Pseudoephedrine Tracking Log ☒ No ☐ Retail/Merchant Tip *If yes, fax report to Child Protective Services ☐ Other: This report is to be faxed to the following agencies that serve the location: Fire Department: BROWNSTOWN FIRE Ilealth Department: JACKSON CO. Fax: 812-358-3898 Fax: 812-522-2916 Fax: N/A			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: TROOPER MARTIN A. MEAD Phone 812-522-1441			

- This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- *** This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.